Only

# STATEMENT OF

PAGE 1 / 18 ·

**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Peters for Michigan PO Box 32072 ADDRESS (number and street) (Check if address is changed) Detroit 48244 MI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS peters@mbacg.com (Check if address is changed) Optional Second E-Mail Address smele@mbacg.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00437889 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Buckles, Geraldine, , , Type or Print Name of Treasurer Buckles, Geraldine, , , [Electronically Filed] 10 15 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

F	EC Fo	orm 1 (Revised 02/2009) Page 2
		COMMITTEE
(a)	aldate ×	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	e of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)  Peters, Gary, , ,
Cand	idate	
Cand Party	idate Affiliati	ion DEM Office State Mouse Senate President District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Candi		
Part	y Con	nmittee:
(d)		This committee is a (National, State (Democratic, Republican, etc.) Par
Polit	ical A	action Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization i
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or pa committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint	Func	draising Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	nmittees Participating in Joint Fundraiser
	1.	FEC ID number C
	2.	FEC ID number
	3.	FEC ID number
	4.	

FEC <b>Form 1</b> (Revise	ed 02/2009)	Page <b>3</b>
Write or Type Committee Na		. 330 2
Peters for Mic		
	d Organization, Affiliated Committee, Joint Fundraising Representat	tive, or Leadership PAC Sponsor
Peters Victory 2020		
Mailing Address	611 PENNSYLVANIA AVE	
	Ste 143	
	Washington	20003
	CITY STATI	E ZIP CODE
	Affiliated Committee  Joint Fundraising Repression  Joint Fundrais	
books and records.	genuity by name, address (prione number optional) and position of the	ie person in possession of committee
Mele, S	iteve, , ,	
Full Name	611 Pennsylvania Ave SE	
Mailing Address	Ste 143	
	Washington	, ,20003
	Washington	
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number	
. <b>Treasurer:</b> List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the commit	ttee; and the name and address of
Full Name Buckles	s, Geraldine, , ,	
of Treasurer	PO Box 32072	
Mailing Address		
	Detroit MI	48244
Title or Position Treasurer	CITY STATE  Telephone number	ZIP CODE

	m 1 (Revised 02/2009)	
Full Name of Designated Agent	Mele, Steve, , ,	
Mailing Address	611 Pennsylvania Ave SE	
	Ste 143	
	Washington DC 20003	
Title or Position Assistant Treas		CODE
Ranks or Other	r Depositories: List all banks or other depositories in which the committee deposits funds, holds ac	counts rents
		counts, rents
	oxes or maintains funds.	odunts, rems
safety deposit bo	oxes or maintains funds.	incounts, rents
safety deposit bo	Depository, etc.  Credit Union One  142886 Woodward Ave	
safety deposit be Name of Bank, I	Depository, etc.  Credit Union One  142886 Woodward Ave	
safety deposit be Name of Bank, I	Depository, etc.  Credit Union One  142886 Woodward Ave	
safety deposit be Name of Bank, I	Depository, etc.  Credit Union One  42886 Woodward Ave  Bloomfield Hills  MI 48304	CODE
safety deposit be Name of Bank, I	Depository, etc.  Credit Union One  42886 Woodward Ave  Bloomfield Hills  CITY  STATE  ZIP	
safety deposit be Name of Bank, I	Depository, etc.  Credit Union One  42886 Woodward Ave  Bloomfield Hills  CITY  STATE  ZIP	
safety deposit be Name of Bank, I	Depository, etc.  Credit Union One  42886 Woodward Ave  Bloomfield Hills  CITY  STATE  ZIP  Depository, etc.  Amalgamated Bank  1825 K Street NW	
safety deposit be Name of Bank, I Mailing Address	Depository, etc.  Credit Union One  42886 Woodward Ave  Bloomfield Hills  CITY  STATE  ZIP  Depository, etc.  Amalgamated Bank  1825 K Street NW	
safety deposit be Name of Bank, I Mailing Address	Depository, etc.  Credit Union One  42886 Woodward Ave  Bloomfield Hills  CITY  STATE  ZIP  Depository, etc.  Amalgamated Bank  1825 K Street NW	

FEC Form 1S (Revised 02/2017)

Page \_5 **of** \_18\_\_

5(a)	or(h). <b>Joint Fundraisin</b>	g Participant:		
(0)	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected Blue Senate 2020	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	918 Pennsylvania Ave SE		
		Washington	DC	20003
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Nama			
	Full Name			
	Full Name L			
		CITY A	STATE A	ZIP CODE A
	Mailing Address	•	STATE A	ZIP CODE <b>A</b>
	Mailing Address	•	1	ZIP CODE <b>A</b>
9.	Mailing Address  TITLE OR POSITION	Tele	ephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma	Tele	ephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma  Name of Bank, Woods	Telections: List all banks or other depositories in which the intains funds.	ephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.	ephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the intains funds.	ephone Number	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spon
Mailing Address	120 Maryland Ave NE		
	Washington	DC	20002
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte		oint Fundraising Represent	Leadership PAC Sp
	y by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi			Leadership PAC Sp
esignated Agent: Identi	y by name, address (phone number – optional)		ZIP CODE A
esignated Agent: Identing Full Name  Mailing Address	y by name, address (phone number – optional)		
esignated Agent: Identii  Full Name	cy by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited afety deposit boxes or make a general and a ge	cy by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Michigan Senate	Organization, Affiliated Committee, Joint Funda Victory 2020	raising Representative	e, or Leadership PAC Spon
Mailing Address	120 Maryland Ave NE		
	Washington	DC	20002
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
	fy by name, address (phone number – optional)	Trundraising nepresent	Leadership FAC S
esignated Agent: Identi		Trundraising Represent	Leadership FAC S
esignated Agent: Identi		Trundraising nepresent	Leadership FAC 5
esignated Agent: Identi		Trundraising Represent	Leadership FAC S
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mail to the content of the conte	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

6.	=	Organization, Affiliated Committee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
	2020 Senate IMP	ACT		
	Mailing Address	918 Pennsylvania Ave SE		
	Ç			
		Washington	DC	20003
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	indraising Representa	tive Leadership PAC Sponsor
0	Designated Asset Identify	, but a series and description of the series and the series of the serie		
8.		by name, address (phone number - optional)		
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE <b>A</b>
8. 9.	Full Name Mailing Address  TITLE OR POSITION	CITY   CITY   Telep	STATE A	
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main	CITY   CITY   Telep	STATE A	
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor	CITY   CITY   Telep	STATE A	
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank,	CITY   CITY   Telep	STATE A	
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY   CITY   Telep	STATE A	
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY   CITY   Telep	STATE A	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page	9	of 18	
rage		OI ·	

(h). <b>Joint Fundraisi</b>	ig raiticipant.		
1.		FEC ID number	С
2.		FEC ID number	C
3		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representative	e. or Leadership PAC Spons
The Top 4 2020 (		<b>9,</b>	
Mailing Address	918 Pennsylvania Ave SE		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	oint Fundraising Representa	ative Leadership PAC Spe
Designated Agent: Identif	d Organization Affiliated Committee S Joby by name, address (phone number – optional)	oint Fundraising Represent	Leadership PAC Spo
		oint Fundraising Representa	Leadership PAC Spo
Designated Agent: Identif		oint Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identif		oint Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identif		oint Fundraising Representa	Leadership PAC Spo
Pesignated Agent: Identif	y by name, address (phone number – optional)	oint Fundraising Representation	Leadership PAC Spo
Pesignated Agent: Identification  Full Name  Mailing Address	y by name, address (phone number – optional)		
Pesignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification  Full Name	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). <b>Joint Fundraisin</b>	_								
1.					FEC ID n	umber	С		
2.					FEC ID n	umber	C		
3.					FEC ID n	umber	C		
4.					FEC ID n	umber	С		
ame of Any Connected		Affiliated Comm	nittee, Joint	t Fundrais	ing Repre	sentativ	e, or Lea	dership P	AC Spor
AL MI MN Victory	2020								
Marilian Adalaha	1751 POTON	MAC GREENS D	R						
Mailing Address									
	ALEXANDRI	Δ				VA I		814	
Relationship:	ALEXANDICA	CITY							
rielationship.		CITY			3	TATE A		ZIP C	ODE A
	d Organization y by name, addr	Affiliated Co			indraising R	epresenta	ative	Leadersh	ip PAC S
					indraising R	epresenta	ative	Leadersh	ip PAC S
esignated Agent: Identify					indraising R	epresenta	ative	Leadersh	ip PAC S
esignated Agent: Identify					indraising R	epresenta	ative	Leadersh	ip PAC S
esignated Agent: Identify	y by name, addr		mber – optic	onal)		epresenta		Leadersh	
esignated Agent: Identify  Full Name	y by name, addr	ess (phone nur	mber – optic	onal)					
esignated Agent: Identify	y by name, addr	ess (phone nur	mber – optic	onal)		ATE A			
Full Name Mailing Address  TITLE OR POSITION	y by name, addr	city	mber – optic	onal)	ST/	ATE A		ZIP CO	-     DE 🛦
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito fety deposit boxes or ma	y by name, addr	city	mber – optic	onal)	ST/	ATE A		ZIP CO	-     DE 🛦
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito fety deposit boxes or ma	y by name, addr	city	mber – optic	onal)	ST/	ATE A		ZIP CO	-     DE 🛦
esignated Agent: Identify  Full Name	y by name, addr	city	mber – optic	onal)	ST/	ATE A		ZIP CO	-     DE 🛦
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito aftety deposit boxes or material depository, etc.	y by name, addr	city	mber – optic	onal)	ST/	ATE A		ZIP CO	-     DE 🛦

FEC Form 1S (Revised 02/2017)

5(a) c	or(h). <b>Joint Fundraisin</b>	a Particinant		
J(g) (	1.	<u> </u>	FEC ID number	C
	2.		FEC ID number	C
			FEC ID number	С
	3.			
	4.		FEC ID number	C
6.	Name of Any Connected MI/NC Senate 202	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Sponsor
	Mailing Address	918 Pennsylvania Ave SE		1
		Washington	, DC	20003
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee X Joint	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
В.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name     Mailing Address  TITLE OR POSITION	CITY   CITY   Te	elephone Number	
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank,	CITY   CITY   Te	elephone Number	
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY   CITY   Te	elephone Number	
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY   CITY   Te	elephone Number	

FEC Form 1S (Revised 02/2017) for Lines 5(g)

	ng Participant:			
1.		FE0	C ID number	С
2		FEG	C ID number	C
3.		FEC	C ID number	С
4.		FEO	C ID number	С
	Organization, Affiliated Committee, J	Joint Fundraising	Representativ	e, or Leadership PAC Sponso
Battleground Vict	Jry 2020			
Mailing Address	611 Pennsylvania Ave SE			
	Ste 143			
	Washington		DC	20003
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	<b>X</b> Joint Fundra	ising Represent	ative Leadership PAC Spo
	y by name, address (phone number -			
Full Name Mailing Address				
Mailing Address	CITY A		STATE A	ZIP CODE A
	CITY A		STATE A	ZIP CODE A
Mailing Address	CITY A	Telephon		ZIP CODE <b>A</b>
Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or means of Bank,	pries: List all banks or other depositorie		STATE ▲ e Number	
Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or more safety deposit boxes or more safety depository, etc.	pries: List all banks or other depositorie		STATE ▲ e Number	
Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or means of Bank,	pries: List all banks or other depositorie		STATE ▲ e Number	
Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or more safety deposit boxes or more safety depository, etc.	pries: List all banks or other depositorie		STATE ▲ e Number	
Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or more safety deposit boxes or more safety depository, etc.	pries: List all banks or other depositorie		STATE ▲ e Number	

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisin</b>	g Participant:			
1.			FEC ID number	er C
2.			FEC ID number	er C
3.			FEC ID numb	er C
4.			FEC ID numb	er C
	Organization, Affiliated Com	mittee, Joint Fund	Iraising Representa	ative, or Leadership PAC Spo
Michigan 2020				
Mailing Address	918 Pennsylvania Ave SE			
	1			
	Washington		DC	20003
Relationship:	CITY	<b>/</b> ▲	STATE	ZIP CODE ▲
	Affiliated Co		nt Fundraising Repres	eentative Leadership PAC S
esignated Agent: Identify			nt Fundraising Repres	eentative Leadership PAC S
esignated Agent: Identify			nt Fundraising Repres	Leadership PAC S
esignated Agent: Identify			nt Fundraising Repres	Leadership PAC S
esignated Agent: Identify		mber – optional)		Leadership PAC S
esignated Agent: Identify	by name, address (phone nu	mber – optional)		
esignated Agent: Identify  Full Name	by name, address (phone nu	mber – optional)		
Full Name Mailing Address  TITLE OR POSITION	ries: List all banks or other de	Imber – optional)	STATE A	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	ries: List all banks or other de	Imber – optional)	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito fety deposit boxes or ma	ries: List all banks or other de	Imber – optional)	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	ries: List all banks or other de	Imber – optional)	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito aftety deposit boxes or material depository, etc.	ries: List all banks or other de	Imber – optional)	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito aftety deposit boxes or material depository, etc.	ries: List all banks or other de	Imber – optional)	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) (	or(h). <b>Joint Fundraisin</b>	g Participant:	
	1.		FEC ID number
	2.		FEC ID number
	3.		FEC ID number C
	4		FEC ID number
6.	Name of Any Connected 2020 Senate Victor		aising Representative, or Leadership PAC Sponsor
	Mailing Address	918 Pennsylvania Ave SE	
		Washington	DC   20003
	Relationship:	CITY ▲	STATE ▲ ZIP CODE ▲
	Connected	1 Organization Affiliated Committee	Fundraising Representative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)	
	Full Name		
	Mailing Address		
	TITLE OR POSITION	▼ CITY ▲	STATE ▲ ZIP CODE ▲
			lephone Number
9.	safety deposit boxes or ma		the committee deposits funds, holds accounts, rents
	Depository, etc.		
	Mailing Address		

FEC Form 1S (Revised 02/2017)

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected Battleground Mic	d Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
Mailing Address	918 Pennsylvania Ave SE		
Relationship:	Washington  CITY ▲	DC DC STATE ▲	20003 ZIP CODE ▲
Connect	ed Organization Affiliated Committee	pint Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Ident	fy by name, address (phone number - optional)		
Full Name			
Full Name L			
Mailing Address	CITY A	STATE A	ZIP CODE A
	CITY A		ZIP CODE A
Mailing Address  TITLE OR POSITIO	ories: List all banks or other depositories in white naintains funds.	STATE A Telephone Number	s funds, holds accounts, rents
Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or not be boxes or not be boxes. Depository, etc.	ories: List all banks or other depositories in white naintains funds.	STATE   Telephone Number  ch the committee deposit	s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

CITY A ganization Affiliated Committee  name, address (phone number – option  CITY A  CITY A  List all banks or other depositories in ins funds.	Telephone	STATE A Number		ZIP CODE A  Leadership PAC S
CITY A ganization Affiliated Committee  name, address (phone number – option  CITY A  List all banks or other depositories in	nal)  Telephone	STATE A		ZIP CODE A  Leadership PAC S
CITY A ganization Affiliated Committee  name, address (phone number – option  CITY A  List all banks or other depositories in	nal)  Telephone	STATE A		ZIP CODE A  Leadership PAC S
CITY A ganization Affiliated Committee  name, address (phone number – option  CITY A  List all banks or other depositories in	nal)  Telephone	STATE A		ZIP CODE A  Leadership PAC S
CITY A ganization Affiliated Committee  name, address (phone number – option  CITY A  List all banks or other depositories in	nal)  Telephone	STATE A		ZIP CODE A  Leadership PAC S
CITY A ganization Affiliated Committee  name, address (phone number – option	nal)  Telephone	STATE A		ZIP CODE A  Leadership PAC S
CITY A ganization Affiliated Committee  name, address (phone number – option	nal)	STATE A		ZIP CODE A  Leadership PAC S
CITY A ganization Affiliated Committee  name, address (phone number – option		ing Represent		ZIP CODE A  Leadership PAC S
CITY ▲ ganization Affiliated Committee			ative	ZIP CODE ▲
CITY ▲ ganization Affiliated Committee			ative	ZIP CODE ▲
CITY ▲ ganization Affiliated Committee			ative	ZIP CODE ▲
CITY ▲ ganization Affiliated Committee			ative	ZIP CODE ▲
CITY ▲ ganization Affiliated Committee			ative	ZIP CODE ▲
CITY ▲	Joint Fundrais		ative	ZIP CODE ▲
		STATE A		
Washington	I	1		* , <u>                                   </u>
		, DC	20006	3
Ste 925				
910 17th St NW	1 1 1 1 1	1 1 1 1	1 1 1 1	
anization, Affiliated Committee, Joint	Fundraising R	epresentativ	e, or Leade	ership PAC Spor
		.5 Hallbol	U .	
			-	
			C	
L L	anization, Affiliated Committee, Joint	FEC FEC	FEC ID number  FEC ID number	FEC ID number C

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisir</b>		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
T			
ame of Any Connected	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
Michigan Victory	2020		
	611 Pennsylvania Ave SE		
Mailing Address	Num 143		
		D0	20002
51	Washington	DC DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint Joint y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or market	y by name, address (phone number – optional)  CITY   CITY   Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the second	y by name, address (phone number – optional)  CITY   CITY   Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make ame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make ame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Telestries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page \_\_\_\_\_ **of** \_\_\_\_\_\_ 18 5(g) or (h). Joint Fundraising Participant: C FEC ID number C FEC ID number C FEC ID number C FEC ID number Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor 6. Flip the Senate 2020 600 Pennsylvania Ave SE Mailing Address #15845 20003 Washington Relationship: ZIP CODE A CITY A STATE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC Sponsor Designated Agent: Identify by name, address (phone number - optional) 8. Full Name Mailing Address ZIP CODE CITY A STATE A TITLE OR POSITION ▼ Telephone Number Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Mailing Address

CITY A

STATE A

ZIP CODE A